

**FAMILY & CHILDREN'S SERVICES
TEAM DECISION-MAKING
PROTOCOL**

August 2, 04

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TEAM DECISION-MAKING PROTOCOL

Philosophy and Purpose

Team Decision-Making (“TDM”) is a best practice strategy that is implemented whenever a child has been removed or is at risk for removal, or whenever a placement change is contemplated. TDM describes a collaborative meeting process designed to produce the optimal decision concerning a child’s safety and placement. It provides for the joint contributions of DHS staff, family members, community partners, service providers, foster parents and the family’s support network. During a TDM meeting, all participants work together to create a plan for safety or placement tailored to the individual needs of each child. The term “safety plan” refers to plans that prevent placement, while the term “action plan” refers to plans regarding out-of-home placement. TDM meetings are also used for permanency planning decisions and to enhance reunifications.

TDM arises from the belief that the well-being of a child is best served by an inclusive collaboration of family, community and child welfare agency rather than by a unilateral public agency decision. The TDM process establishes a forum to share ideas and opinions and to identify accessible, wraparound resources available as immediate supports in a family’s neighborhood. TDM philosophy embraces the importance of the family’s perspective and involvement, stresses full participation of all attendees, and encourages honest communication. Throughout the meeting process, TDM staff promote an atmosphere of dignity and respect. Achieving consensus among participants is a valued goal of the TDM process.

A family’s initial TDM meeting serves as an immediate intervention to prevent removal or to arrange kinship care if necessary. If an out-of-home non-relative placement is needed, the team decision reflects the least restrictive type of placement as dictated by the child’s needs. In each case, the ultimate objective is to preserve the family or to reunify parents and children in a safe manner as soon as possible. If it is not possible to return a child to his/her birth family, a TDM meeting is held at the most appropriate time during the concurrent planning process to aid in identifying a permanent home for the child.

For the benefit of the child and his/her family, non-relative placements are selected from foster parents available in the child’s neighborhood or community, as defined by the family’s affiliations. In this manner, a child is able to maintain close contact with family and friends and remain enrolled in his/her school while living in familiar surroundings.

For children who are removed from their parents, TDM practice espouses the goal of one placement per child. Consequently, whenever a placement is threatened by disruption, TDM meetings focus on devising plans to support the current placement in order to prevent a placement change.

TDM is embedded within a larger vision of child welfare practice that crafts mutually supportive, interdependent relationships among Family & Children's Services, neighborhoods and communities. The overall vision encompasses three additional strategies with the following missions:

Recruitment, Training & Support - Mission:

- to increase recruitment of foster parents in the neighborhoods with the highest frequency of children who are removed from their homes
- to nurture supportive relationships between foster parents and birth parents
- to provide foster parents with the resources they need to sustain care for their foster children

Community Partnerships - Mission:

- To build partnering relationships with individuals and agencies in neighborhoods and communities served by Family & Children's Services in order to link families with easily accessible services and on-going supports
- To identify community partners who can participate in TDM meetings, often on short notice, to serve as liaisons between families and community-based services and organizations

Self-Evaluation - Mission:

- To collect and compile data produced by TDM meetings
- To measure critical outcomes and generate analyses that permit the refinement of all four strategies in order to advance child welfare practice

The opportunity for team decision-making is provided as a standard and consistent practice for all F&CS families. While the TDM process encourages the involvement of multiple participants, the TDM meeting will be held regardless of the lack of attendance by any parent, family member, caregiver, support person or provider.

Goals

In conjunction with the other three strategies noted above, TDM practice aims to accomplish the following:

- Reduce the number of removals through team-designed safety plans
- Place children with kin and/or in their own neighborhood or community
- Place siblings together
- Place children in the least restrictive environment that addresses their needs
- Reduce reliance on institutionalized and group home care
- Provide comprehensive services based in the family's neighborhood, connecting families to community supports that offer ongoing assistance
- Create a team approach among foster parents, birth parents, service providers and the Department to promote reunification whenever possible
- Stabilize and preserve existing placements through caregiver support and services to children to achieve the target of 1 placement per child

- Return the child home safely or provide permanency as soon as possible
- Decrease the frequency of children re-entering foster care

While it is clear that not all of the above goals will be achievable at the start of TDM implementation, they provide *direction* to TDM practice. For example, as the Recruitment, Training & Support strategy progresses in San Francisco, more foster parents will be recruited to assist in making the goal of local neighborhood and community placements a reality.

Applications

The TDM meeting is used on a *mandatory* basis for consistency and accountability to create safety and placement plans for the following circumstances and stages of a case:

1. Emergency Removals
2. Potential Removals
3. Placement Preservation (applicable to *all* placement changes)
4. Permanency Planning
5. Reunifications

Guidelines for Referrals

As applicable, for certain categories indicated below, references regarding assessment tools will be added to this portion of the Protocol once they are devised.

1. Emergency Removals

When a child is removed from his/her home on an emergency basis, the Protective Services Worker (the “Worker”) makes a TDM referral immediately, and upon receipt of the referral, is informed by TDM staff of the time and location of the TDM meeting. The TDM meeting is convened by the next business day, and must, under all circumstances, be held before the detention hearing.

2. Potential Removals

When the necessity for removing a child is in question, the assigned Worker consults with his/her Supervisor. If there is an imminent or escalating risk of removal, the TDM referral is made immediately and TDM staff schedules the TDM meeting within 2 business days.

3. Placement Preservation (for *all* placement changes)

A TDM referral is made whenever a Worker determines in conjunction with his/her Supervisor that a child’s placement is threatened by disruption or the Worker has received a 7-day notice from the care provider. A TDM referral is also made when the child’s placement raises concerns regarding care and safety. In these situations, TDM staff will schedule the TDM meeting within 3 business days. For a crisis situation, the TDM meeting will be scheduled within 2 business days.

4. Permanency Planning

A TDM referral is made when a Worker determines in conjunction with his/her Supervisor during the course of concurrent planning that reunification is unlikely and that a permanent plan will be required. The TDM will be scheduled by TDM staff before the next court hearing, and preferably within 5 business days of receipt of the request, unless the family would prefer a later date.

5. Reunifications

A TDM referral is made when a Worker decides in conjunction with his/her Supervisor to commence extended or overnight visits preceding reunification or to return the child home. The TDM will be scheduled by TDM staff before the next court hearing, and preferably within 5 business days of receipt of the request.

Assessment Tools

Assessment tools corresponding with TDM meetings for removals, placement disruptions, permanency planning and/or reunifications may be designed in the future and eventually appended to this Protocol.

Decision-Making Rule

The TDM process aspires to reach decisions on the basis of group consensus. This concept represents the heart of TDM practice. If group consensus cannot be attained, then the attending Worker and the attending Supervisor endeavor to reach agreement with each other. If the Worker and Supervisor do not agree, then the Supervisor makes the decision. If there is no attending Supervisor, the Worker makes the decision.

Once the determination is made, it is adopted as the Department's official plan and fully supported by F&CS staff. It should be clarified that the Department's mandate to protect children and its consequent liability are maintained throughout the Team Decision-Making process.

Appealing a Decision

Only the Facilitator may make an Appeal. Staff who do not attend the TDM meeting cannot request an Appeal. Appeal requests are not initiated simply because of a lack of consensus, but rather are limited to the following two conditions:

- 1) the perceived health and safety risk to a child is not adequately addressed by the TDM decision; and/or
- 2) the TDM decision is perceived as violating the law or DHS policy.

If either of these conditions apply, it is the *duty* of the Facilitator to request an Appeal.

Appeals are heard by an F&CS Program Manager, and whenever necessary, by the F&CS Deputy Director. Particularly for the benefit of the family, the Facilitator shall state his/her intention to appeal *before the close of the meeting*. The Facilitator may appeal after the meeting, but within 24 hours if, under rare circumstances, new information is received subsequent to the TDM meeting that is deemed to affect the child's safety, or if subsequent review of law or DHS policy causes the Facilitator to question a decision. In this situation, the Facilitator will notify participants by telephone promptly after the Appeal decision has been made.

Appeals Procedure

For the sake of the child and his/her family, determination regarding placement is of the utmost urgency. Consequently, the Appeal should be held immediately following the meeting, or as quickly as possible thereafter.

The three F&CS Program Managers will each serve 4-month rotations as the "Primary Contact" to hear Appeals during the course of a year. The Facilitator arranges the Appeal by contacting the F&CS Program Manager who is presently on rotation as the Primary Contact for Appeals. If the Primary Contact is not available, the Facilitator proceeds to contact the other two F&CS Program Managers. If neither remaining Program Manager is available, the Facilitator shall contact the F&CS Deputy Director to hear the Appeal.

The Facilitator provides the Program Manager or Deputy Director who will be hearing the Appeal with a copy of the "TDM Request", the "TDM Meeting Record" and the "TDM Appeal" forms. The Facilitator and DHS staff who were present at the TDM meeting are required to attend the Appeal. Additionally, the Supervisor of the assigned Worker shall be required to attend even if he/she did not attend the original TDM meeting.

Staff present their assessment of the issues in a format that is structured the same as a TDM meeting and facilitated by the TDM Facilitator. The Program Manager (or Deputy Director) then makes the final decision that becomes the agency's official position, binding upon all staff. The remaining TDM participants are promptly notified by the Facilitator, by telephone, regarding the Appeal decision. The Facilitator shall also mail to attendees written documentation of the Appeal decision.

Confidentiality

The TDM meeting is a private forum focused on achieving consensus regarding placement decisions. In this respect, TDM meetings are to be distinguished from investigations and should not be experienced by the family as an investigatory procedure. However, information shared at the meeting can be utilized for the creation of a case plan and/or for the development of recommendations for court orders or during court proceedings. Otherwise, any information provided by the parent, caregivers, collateral contact, etc. remains within the context of the meeting and should not be documented in the case record or included in the Court report.

Mandated reporting laws as well as professional ethics apply to TDM meetings. These limitations on confidentiality are explained to participants at the start of TDM meetings.

Only the recommendations made as a result of the meeting can be included in the court record. The record of the TDM meeting should be filed in Part VI of the case folder, which is not included in discovery.

Participants

TDM meetings invite the participation of parents, legal guardians, guardians ad litem, family members, the family's support network, foster parents, service providers, child advocates and community partners. For example, family friends, clergy, public health nurses, CASAs, FFA workers, group home and residential care representatives, CalWORKs workers, teachers and other school staff are all included among those who could assist in formulating a team decision. (It should be noted that attorneys and court-appointed social workers are *not* included in TDM meetings.)

Based on a child's maturity, cognitive-emotional status and the anticipated subjects to be discussed at the TDM meeting, the referring worker assesses the appropriateness of a child's attendance at the meeting. The worker considers if the child's attendance will benefit the child and the team. In some cases, it may be appropriate for a child to attend only a portion of a meeting. Teenagers are expected to attend unless the worker determines that participation would be detrimental to the teen. For children who do not have an identified advocate, the person who serves as the child's best support shall be invited. Teenagers are also encouraged to identify individuals whom they would like to invite to the meetings.

Attendance Requirements for DHS Staff

The assigned Worker and a TDM Facilitator are *required* to attend. If the assigned Worker will be absent due to illness, vacation or other reason approved by the Worker's Supervisor, and the Worker's Supervisor is unable to attend the TDM meeting, he/she shall arrange for a "Designee" to attend in place of the assigned Worker.

For cases involving emergency response Workers, if applicable, the assigned Worker may request that another emergency response Worker assisting with the investigation (a "buddy" Worker) *also* be invited to attend. After-hours Workers will not be required to attend TDM meetings, but may attend if they elect to do so.

The assigned Worker and his/her Supervisor shall consult with each other on the relevant placement issues prior to the TDM meeting. Such consult is particularly important for circumstances when the Supervisor will not be attending the TDM meeting. Workers and Supervisors who do not attend cannot change or appeal the decision made at the TDM meeting.

The attendance of Supervisors is encouraged whenever possible. Additionally, Supervisors within the same Program or Section may be appointed as a Designee to appear on their behalf.

Mandatory Supervisor Attendance

Supervisors or their Designees attendance is mandatory under the following circumstances:

- The first 6 TDMs of all new Protective Services Workers.
- High profile cases, for example, News/media involved, stakeholder interest, complex cases, etc.
- Cases where the Protective Services Worker and their Supervisor do not have a clear consensus.
- Cases where additional support for the Protective Services Worker is needed.

Notification of Birth Parents or Legal Guardians

The Protective Services Worker will notify the Birth Parents/Legal Guardian of the TDM time and location in person. They will also explain the TDM process and goals to them at that time. A TDM Brochure and TDM Notification Form will also be given to the Birth Parents/Guardians so they can read about the process and have written verification of the date and time of their TDM.

If they are unable to notify the Birth Parent/Legal Guardian in person the Protective Services Worker will leave a TDM Notification Form at their home/door and send a telegram stating the time, date, and purpose of the TDM, along with Workers contact information.

Role of DHS Staff Participants

DHS staff participants include the **Facilitator**, the **Protective Services Worker** and the **Protective Services Supervisor** assigned to the case. Each performs a unique role before, during and after the TDM meeting. Their functions and duties are described below.

Facilitator

Function:

The role of the Facilitator is to assist the TDM team to develop a safety or action plan, specifically regarding a child's placement, through assessment, brainstorming, negotiation and consensus-building. By upholding the goals of TDM practice as noted above, the Facilitator proactively guides the TDM team to produce a safety or action plan that reflects the family's strengths and incorporates community resources to secure the safety and well-being of the child, whether at home or in out-of-home placement. The first priority is to preserve the family by preventing placement. However, if out-of-home care is necessary, the second option is always the *least restrictive* available placement. Relatives placements and non-relative extended family member ("NREFM") placements are considered first. If a child cannot be placed with relatives,

then placement with a foster parent in his/her neighborhood or identified community is considered next. Mandatory clearance procedures shall be followed for all placements.

The Facilitator assists the assigned Worker to manage the TDM meeting. The Facilitator directs the process and structure in a manner that promotes an inclusive, safe and supportive environment. The Facilitator models respectful interactions, active listening skills, flexibility and quality service. He/she focuses on family strengths, quells blaming and shaming, and insures that every participant has opportunities to speak and to be heard.

The Facilitator clearly explains the purpose and the ground rules for the meeting, elicits information from the participants, defines the problem and fosters carefully considered collaborative decisions based on a thorough examination of the issues. The Facilitator may need to manage conflict and strong emotions as these arise by utilizing conflict management skills. He/she keeps participants on task in order to complete the planning process within 1.5 to 2 hours. At the completion of the meeting, the Facilitator accurately records TDM information and decisions on designated forms and provides a copy to all participants of the "TDM Meeting Record," indicating safety/action steps. The Facilitator also notes on the "TDM Meeting Record" whether or not he/she recommends that the family be offered a follow-up Family Conference.

The Facilitator is expected to maintain a broad knowledge of DHS policy, procedures and agency resources available to clients. Utilizing this experience, the Facilitator shall exercise his/her responsibility to intervene in the meeting process to ensure that DHS policies and the safety of the child are addressed in the safety or action plan. The Facilitator may request an Appeal of any safety or action plan that he/she believes jeopardizes the health or safety of a child or violates law or DHS policy. The Facilitator initiates the Appeal by completing the "TDM Appeal" form and by contacting the Program Manager who is the current Primary Contact for Appeals. The Facilitator also notifies TDM participants regarding the Appeal decision.

Preparation:

The Facilitator reviews the "TDM Request Form" that was completed by TDM staff upon receipt of the Worker's referral. The Facilitator assists with arrangements to address any special needs and/or safety issues regarding the participants that were identified upon intake. The Facilitator may also choose to consult with the referring worker prior to the TDM meeting, although this is *not* recommended for removals or potential removals when prior consultation might tend to bias the Facilitator. The Facilitator also prepares the meeting room, including supplies and materials that participants need.

Post-meeting Duties:

After the TDM meeting, the Facilitator enters data required for the TDM database. The Facilitator may also mail a copy of the "TDM Meeting Record" to any parent who retains parental rights but who did not attend the TDM meeting. Whenever possible, the Facilitator and other DHS participants are encouraged to debrief with one another in order to share successes and to assess and strengthen the quality of TDM meetings in serving families and children.

Ancillary Duties:

In addition to hosting TDM meetings, the Facilitator participates in intra- and interagency committees to exchange information and to develop TDM practice consistent with the needs of the community and high professional standards. The Facilitator provides constructive feedback to Workers and Supervisors regarding their participation in TDM meetings, for example, issues of respect, promptness, preparedness, etc. The Facilitator also meets regularly with his/her Supervisor to discuss TDM practice issues. Since the Facilitator encounters a wide spectrum of family circumstances, the Facilitator is also expected to identify any DHS practices that inadvertently hinder the goals of TDM so that they may be revised accordingly. In this manner, the TDM Facilitator serves as a support to Supervisors and Managers.

Referring Protective Services Worker (the “Worker”)

Function:

The assigned Worker manages the TDM meeting with the assistance of the TDM Facilitator. Workers are responsible for escorting to and from the meeting room family members and support persons who come late or leave prematurely. Early in the meeting process, the Worker presents to family members and all other participants the observed strengths of the family and the concerns of the Department, drawing from a completed assessment tool appropriate to the type of TDM, if applicable. In addition to sharing his or her own recommendations regarding safety or action planning, the Worker maintains receptivity to the ideas expressed by other participants and works as a team member to discuss and formulate the plan.

If consensus among all participants cannot be reached, the Worker, in conjunction with the attending Supervisor, makes the decision. If the Worker and Supervisor do not agree, the Supervisor determines the decision. If there is no attending Supervisor, the Worker makes the decision. The final determination then becomes binding upon F&CS staff, unless it is overturned by the outcome of an Appeal initiated by the Facilitator.

Preparation:

The Worker consults with his/her Supervisor when he/she determines that convening a TDM meeting is or may be necessary. The Worker and Supervisor jointly identify risks, family strengths and other issues concerning placement. If the consultation indicates that the family’s situation meets the criteria for a TDM meeting, the Worker notifies the TDM Unit and provides relevant information. Upon the Worker’s notification, the TDM Unit assigns the date, time and location for the TDM meeting. In advance of the meeting, the Worker completes the assessment tool appropriate for the type of TDM to be held, if applicable. The referring Worker may also consult with the Placement Coordinator regarding available placement options prior to the TDM meeting.

- ***The Worker invites parents, legal guardians, relative caregivers, foster parents, FFA, group home or residential care representatives and other relevant service providers with whom he/she has routine contact. The Worker also briefs these family members and caregivers about the team decision-making process and encourages the parents to bring additional relatives and support persons to the meeting. It is critical that the Worker also alert TDM staff at the time of intake (or as soon as known) about any safety issues or potentially disruptive behavior. Reportable issues include; history of violence, threats,***

history of aggression, animosity between family members, substance abuse issues, mental health issues, or domestic violence and/or the existence of restraining orders, etc.. TDM will not cross a restraining order, please do not invite both parties if a restraining order is in effect.

The Worker encourages relatives and caregivers to make alternate childcare arrangements for their non-dependent children. However, if no alternatives are available for either non-dependent or dependent children, the Worker can refer parents, relatives and caregivers to the Child's Playroom on the first floor at 170 Otis, where childcare for TDM meetings can be provided. *Some restrictions apply for the Child's Playroom.* Please see the "Childcare" section on page 17 for more detail. The Worker also informs the TDM Unit regarding language needs so that TDM staff can proceed to arrange for interpretation services. Additionally, the Worker advises the TDM Unit if a wheelchair accessible site is required.

In order to assist in maintaining the security of DHS offices, *Workers shall provide a list of known or expected participants to the guard serving at the DHS site (or, as applicable, at the community site) where the meeting will be held.* Workers shall also tell parents and relatives whom they invite that they, and other family members and support persons, should identify themselves to the guard as TDM meeting participants. For convenience and consistency, a "TDM Participant List" form noting the meeting room location and corresponding telephone number will be made available to referring Workers for submission to security personnel.

Post-meeting Duties:

Immediately after the conclusion of the TDM meeting, the Worker consults with the Placement Coordinator regarding any placement change to be made to a non-relative placement. The Worker also follows through with items indicated in the safety or action plan as recorded in the TDM meeting.

The Worker has primary responsibility for accessing supports and services for county-licensed foster parents that have been identified during a TDM meeting. As a supplement to the Worker's efforts, he/she may seek assistance from the Foster Family Support Social Worker, and can provide this Worker with a copy of the "TDM Meeting Record," if appropriate.

Workers are responsible for providing feedback to the TDM Facilitators regarding the process of the meeting and their impressions regarding how the interaction between them and the Facilitator worked, for example, issues of respect, support, encouragement, etc.

Supervisor of Referring Worker:

Function:

The Supervisor jointly determines with the assigned Worker when a TDM meeting should be convened. Prior to the TDM meeting, the Supervisor consults with the Worker to identify risks, family strengths and other issues concerning placement. The Supervisor remains receptive to opinions and ideas offered by other participants during the TDM meeting, reinforcing an

atmosphere of shared decision-making. After a thorough assessment of the family's situation, the Supervisor assists in the formulation of the safety or action plan. If consensus among participants is not achieved, the Worker, in conjunction with the Supervisor, makes the final decision. If the Worker and Supervisor do not agree, then the Supervisor makes the determination. As noted earlier, the Facilitator may request an Appeal based on child health or safety or a violation of law or DHS policy. If the Supervisor does not attend the meeting, he/she cannot change the decision or make an Appeal. However, the Supervisor must attend the Appeal even if he/she did not attend the original TDM meeting.

Supervisors are counseled to be aware that new information may be revealed during the meeting that might change the assessments and options discussed with their Workers prior to meetings. When a Supervisor cannot attend a TDM, the Worker will need to make a final decision on his/her own, or join in consensus with other participants based on the new information provided. Consequently, the decision may not reflect the Supervisor's earlier recommendations.

Conflict Resolution

Conflict resolution between agency staff should be processed through the chains of command if issues cannot be resolved interpersonally.

Role of Other Participants

Birth Parents

The Worker briefs the parents about the team decision-making process and asks parents to invite to the TDM meeting other relatives or support persons of their choosing. If applicable and available, the Worker asks the parents if they would like a Community Partner (defined below) to participate in their meeting. The Community Partner is introduced to the family prior to the start of the meeting. The Facilitator welcomes the family and escorts parents, family members and their support persons into the meeting room before other participants. At the start of the meeting, the Facilitator establishes an environment that encourages parental participation and invites the parents and family members to speak first.

Incarcerated Parents

Collaboration with Friends Outside with respect to TDM practice is currently being explored. On a case-by-case basis, the Friends Outside program may be able to provide a representative who could serve as an advocate for an incarcerated parent at the TDM meeting.

Hospitalized Parents

If the Birth Parent/Legal Guardian is in the hospital, the Protective Services Worker will attempt to schedule the TDM at the hospital. If this is not possible, a connection by speaker phone will be attempted. Any exception to cancel the meeting until the parent is available must be approved by a Program Manager. This decision will be made on a case by case basis.

Foster Parents and FFA, Group Home or Residential Care Representatives (“care representatives”)

Foster parents and/or care representatives (as indicated above) are expected to participate in TDM meetings that are held after a child is already in placement, for example, when the placement is likely to be disrupted, or when making decisions regarding permanency or reunification. With respect to children who have recently been removed, foster parents would not be invited to participate in TDM meetings until *after* a detention hearing.

Function:

Foster parents and care representatives are valuable members of the TDM team. During the course of the meeting, they are invited to express their observations about the child’s needs and to assist in the creation of an action plan. By participating in TDM meetings, foster parents and care representatives further develop a partnering relationship with the child’s family. Through this partnership, they can assist birth parents in the family’s transition towards a successful reunification when this is the permanent plan.

The Community Partner

As Team Decision-Making is developed in San Francisco County, Community Partners will be identified who represent neighborhoods or communities where child welfare cases occur. Until such partners are designated, the TDM Unit or Worker can invite staff from agencies who already serve the family or support persons who can help the family to access community-based services. When the Worker invites the parents to the TDM meeting, he/she shall also ask them to identify their community support persons. If no community support persons are identified, the Worker briefly explains the role of the Community Partner and asks the parents if they would like a Community Partner (if available) to participate. If the family is agreeable to the Community Partner’s participation, he/she offers practical assistance regarding the creation of the safety or action plan

Function:

The Community Partner shall be knowledgeable about services that can be offered to a particular family, functioning as a liaison between the family and individual agencies. The Community Partner identifies services within the family’s neighborhood or offered through a community agency with which the family is affiliated, seeking supports that provide both short-term and ongoing assistance.

Post-Meeting Duties:

Once services have been identified in the safety or action plan, the Community Partner helps to execute the plan by assisting the family to obtain those services.

Service Providers

For the purposes of TDM meetings, service providers are differentiated into two categories: service providers who are already providing services to the family and *potential* service providers. Service providers who have an existing involvement with the family are important contributors to the TDM process and shall be invited to attend TDM meetings. However, Workers are called upon to use their discretion when deciding whether or not it would be advantageous for a *prospective* service provider to be at the table. Particularly for emergency removals and potential removals, it is generally advisable *not* to invite potential providers, as families might become intimidated by the overrepresentation of professionals and consequently the spirit of the team process could be hindered. Alternatively, the Worker is advised to alert prospective providers so that, if indicated in the safety or action plan, the family can promptly be linked to the provider's services. This may be especially useful with respect to substance abuse and domestic violence issues. In these cases, the Worker may wish to contact in advance the Family Intervention and Recovery Services Team ("FIRST"), the DHS Domestic Violence Specialist or the Woman, Inc. Domestic Violence Advocate who is based in the Department. FIRST providers can be contacted by calling the FIRST duty line or the FIRST Supervisor.

In some instances, a parent may object to the presence at the TDM meeting of an existing provider. In these situations, the Worker is encouraged to use his/her judgement as to whether or not to invite the provider in question. The Worker can explain to the parent the advantages to be gained from the provider's participation. However, if the parent adamantly states that he/she will not attend if the provider is invited, the parent's attendance is usually considered more important.

CalWORKs Workers, Probation Officers and Public Health Nurses shall be invited to TDM meetings, as applicable. For example, it may be useful for a Public Health Nurse to explain how a child's medical condition pertains to a placement decision.

TDM/Placement/Family Conference Unit Staff

Unit Supervisor:

In addition to other duties customarily associated with a supervisory position at Family & Children's Services, the TDM/Placement/Family Conference Unit Supervisor (the "Supervisor") oversees the TDM Facilitators, the Placement Coordinators, the TDM Clerk and the Family Conference Specialists. The Supervisor recommends TDM policies and procedures and manages their day-to-day implementation. The Supervisor shall have an active role in shaping TDM practice by considering the experiences of DHS staff, family members, foster parents and other key TDM participants as TDM practice evolves.

The Supervisor provides consultation and instruction to the TDM Clerk in assigning Facilitators. One objective of the consultation is to maintain a caseload balance among Facilitators that reflects all TDM meeting types (removal, placement preservation, permanency planning and reunification). *The Supervisor also reviews with the assigned Facilitator any cases involving*

safety and added security measures, including cases involving domestic or other kinds of violence, physical threats and restraining orders. The Supervisor shall make arrangements for such added security measures. In addition, the Supervisor regularly holds debriefing sessions with Facilitators about recently conducted TDM meetings and assists in arranging additional trainings for Facilitators as needed. The Supervisor oversees the documentation of TDM meetings and the maintenance of the TDM database. When necessary, the Supervisor serves as a back-up Facilitator.

TDM Facilitators

The role of the TDM Facilitator has already been discussed in detail above. Please refer to pages 7 and 8 in the Section entitled “Role of DHS Staff Participants.”

Placement Coordinators:

The referring Worker confers with the Placement Coordinator regarding the availability and type of non-relative out-of-home placements that will best meet the child’s individual needs in the least restrictive setting. This consult shall always occur immediately after a TDM meeting when the action plan requires out-of-home non-relative placement, and can also occur as part of the referring Worker’s preparation to learn about placement options prior to the TDM meeting. The Facilitator may also ask the Placement Coordinator about current vacancies in preparation for a meeting. In addition to maintaining a comprehensive knowledge base of available placement options, the Placement Coordinator performs other duties that have been customarily associated with arranging placements. Placement Coordinators may wish or can be requested to attend Placement Change TDM meetings from time to time as their workload permits and as approved by their Supervisor. Placement Coordinators can also be involved by speaker phone.

TDM Clerk:

The TDM Clerk (the “Clerk”) receives incoming requests for TDM meetings *by telephone* and acquires from the referring Worker the basic information necessary to prepare the Facilitator for conducting the meeting and to advise the Placement Coordinator regarding possible placement needs. At the time of the referral, the Clerk provides an immediate response to the referring Worker stating the date, time and location assigned for the TDM meeting. According to standard TDM scheduling procedure, the Clerk allots a total of two time slots each day to accommodate emergency removals or emergency placement changes.

In the course of making the referral, the Worker indicates who should attend the meeting. As noted earlier, the referring Worker invites the parents, legal guardians, caregivers or other care representatives and providers with whom he/she has regular contact. The Clerk proceeds to invite the Community Partner, providers, caregiver representatives or DHS staff who will *not* be contacted by the referring worker.

The Clerk also asks the Worker if there are any safety concerns (e.g., domestic or other violence, threats and/or restraining orders) associated with the participants. It is critical that the Clerk report all safety concerns to the TDM Supervisor and the assigned Facilitator.

The Clerk seeks information from the referring Worker and the invited participants regarding special needs, such as interpreters, wheelchair access, childcare, transportation, etc. The Clerk assigns the meeting location according to the family's special needs and arranges for language interpretation services, if required.

The Clerk assigns cases to Facilitators in consultation with the Supervisor. Spanish language meetings will be assigned to a Spanish-speaking Facilitator. The Clerk also serves as a coordinator for matters pertaining to TDM meeting sites. Additionally, the Clerk performs data entry and maintains files as required by the TDM Unit.

Family Conference Specialists

The practices of TDM meetings and Family Conferencing shall complement each other. Family Conferencing Specialists shall continue to develop the Family Conferencing Program in addition to coordinating and facilitating Family Conferences. As distinguished from mandatory TDM meetings, Family Conferences will continue to be offered on a *voluntary* basis for a variety of issues, including, but not limited to, comprehensive case planning, visitation arrangements, and the provision of supportive services to parents, children and relative caregivers. Protocols and procedures for Family Conferencing are described in a separate document.

With respect to TDM practice, Family Conferencing Specialists shall serve as back-up Facilitators for TDM meetings. Additionally, when a TDM Facilitator indicates on the "TDM Meeting Record" that a family should be offered a follow-up Family Conference, a Family Conferencing Specialist will pursue this recommendation with the assigned Worker. Family Conferencing Specialists shall also provide cross-training in Family Conference facilitation to the TDM Facilitators.

Interstate Compact for the Placement of Children ("ICPC")

At this time, TDM meetings for children in interstate placements will be available on a case-by-case basis, as appropriate. Out-of-state caregivers will not be required to attend.

Indian Child Welfare Act (“ICWA”)

At present, TDM meetings do not apply to children placed on Native American reservations. However, TDM meetings can be held for Native American children who are within the purview of ICWA but who do not reside on reservations. In relation to these children, the Community Partnerships Team will pursue the engagement of tribal representatives and Native American expert witnesses in the TDM process.

AWOL Children

AWOL youth refers to those youth who are AWOL more than 24 hours, which results in a change of placement. TDMs will be held for these children in an effort to stabilize and support their placements. TDM staff recognizes the difficulties of scheduling a TDM for youth with a history of AWOLs and every effort will be made to schedule the TDM quickly so that the youth may participate. However, if the youth is AWOL at the time of the meeting, the TDM will proceed in order to plan appropriately for when the youth returns. If the youth returns prior to the TDM, the youth should be placed but the TDM will proceed to support and assist with placement stabilization.

PSWs are encouraged to invite former caretakers and interested collaterals that know the youth and can contribute to the placement plan. Interested parties can help make the TDM meaningful for staff and current caretakers through the development of an informed plan which can include what strategies have been successful in maintaining placements, alternative plans, etc. This exchange of information and support is important in establishing successful placements for these high-risk youth.

TDMs will NOT be held more than twice in a 3 month period for AWOL children. If a youth AWOLs more than twice in that time period, the PSW will refer the case for a Family Conference for more intensive and inclusive strategizing. If the family does not desire a Family Conference, the PSW must then schedule an MDT or an Administrative Review. Any exception will require written approval by a Program Manager.

Scheduling & Notification

The TDM Clerk is responsible for scheduling TDM meetings. At this time, TDM meetings will be scheduled for standard 2-hour intervals throughout the day during normal business hours, Monday through Friday. Two time slots each day will be reserved for TDM meetings for emergency removals or potential removals.

As already noted, the Worker makes a referral *by telephone* as soon as he/she decides that a TDM meeting is mandated. At the time of the referral, the Clerk informs the Worker of the date, time and location of the TDM meeting based on the type and urgency of the TDM meeting to be

held. The timeframes for scheduling different types of TDM meetings are described in the earlier section of this Protocol entitled “Guidelines for Referrals” on page 3.

As stated earlier, the Worker invites parents, legal guardians, relative caregivers, foster parents, FFA, group home or residential care representatives and other relevant service providers with whom he/she has routine contact. The Worker also briefs regularly contacted birthparents, guardians, and caregivers about the team decision-making process and encourages *the parents* to invite additional relatives and support persons.

It is critical that the Worker also alert TDM staff at the time of intake (or as soon as known) about any safety issues or potentially disruptive behavior. Reportable issues include; history of violence, threats, history of aggression, animosity between family members, substance abuse issues, mental health issues, domestic violence and/or the existence of restraining orders, etc. TDM will not cross a restraining order, please do not invite both parties if a restraining order is in effect. In addition, the Worker instructs the TDM Unit to arrange for language interpretation needs or for a site with wheelchair accessibility.

Workers and Supervisors are not mandated to attend TDM meetings after their scheduled work hours or 6 PM, but may request an after-hours meeting Monday through Friday for crisis situations if this best suits the family, and if the Worker and/or Supervisor are/is willing to attend. The provision of TDM meetings after customary work hours shall also depend upon the availability of a Facilitator or back-up Facilitator to conduct the meeting.

Meeting Sites

At the time of this writing, several meeting sites in Departmental offices have been finalized and others are in the process of being secured. Additionally, neighborhood-based meeting sites are also being explored. Wheelchair accessible sites are available. Memoranda will periodically be distributed to staff indicating current meeting locations. At this time, the meeting sites and their availability days are as follows:

Locations	Days
<u>170 Otis</u>	
4 th Floor Conference Room (across from the elevators)	Monday – Friday
7 th Floor Conference Room	Monday
1 st Floor Conference Room #2	Tuesday
6 th Floor Conference Room	Friday
<u>3801 3rd Street</u>	
Family Meeting Room, 2 nd floor	Wednesday
Foster Parent Resource Room, ground floor	Monday & Friday

Sites reserved for TDM use shall be dedicated to that purpose so that they can be relied upon to be available for emergency as well as pre-planned meetings. The sites should offer adequate, comfortable seating in quiet, private settings. The sites should also afford access to telephones, a copier and, if possible, a networked computer for DHS sites.

Security and Safety

Security

Security is provided at all DHS meeting sites during normal business hours. In order to assist with security measures regarding the entrance of persons into DHS buildings, *Workers shall provide a list of known or expected participants to the guard serving at the DHS site where the meeting will be held.* It is understood that this list may be incomplete, as family members are encouraged to invite other relatives and support persons. Birth Parents/Legal Guardians will be responsible to notify the Worker what other family members/support persons they have invited at least two hours before the scheduled TDM. The Worker shall tell parents and relatives whom they invite that they, and other family members and support persons, should identify themselves to the guard as TDM meeting participants. For convenience and consistency, a “TDM Participant List” noting the meeting room location and telephone number will be made available to referring Workers for submission to security personnel. Workers are also responsible for escorting to and from the meeting room family members and support persons who come late or leave early.

Safety

As indicated earlier in this document, the referring Worker alerts the TDM Clerk about any safety issues associated with TDM participants as soon as the Worker becomes aware of such concerns. The TDM Clerk then notifies the TDM Unit Supervisor and the assigned Facilitator. The TDM Unit Supervisor arranges for additional security measures to be implemented at DHS and at community sites. For meetings in neighborhood locations, safety measures may include the hiring of a security guard. In such cases, the TDM Unit Supervisor or designee of the same or higher level provides advance notification and justification to the appropriate DHS office for this requirement.

On a case-by-case basis, family members who potentially pose emotional trauma or physical threat to other family members may not be able to be present at the TDM meeting. *Restraining orders are always observed.* When, for safety reasons, it is not appropriate for a family member to attend, other arrangements, such as a separate meeting, participation by telephone or through correspondence, may be made.

Interpretation and Translation Services

The referring Worker alerts the TDM Clerk regarding the language needs of participants, including the number of persons who require interpretation services. Spanish-speaking families will be assigned to Spanish-speaking Facilitators. For other languages, the Clerk will proceed to arrange for services through the DHS Civil Rights Office. At this time, it is planned that the “TDM Meeting Record” and the “TDM Appeal” forms will be translated into the five most commonly encountered languages in our client population.

Transportation

At this time, DHS staff are not available to serve as transporters. However, if requested, transportation assistance can be offered to family members, caregivers, and support persons in the form of MUNI bus tokens that can be obtained through the Rate Setter.

Childcare

Childcare services are available at the Child’s Playroom on the first floor of 170 Otis. *The children utilizing this service must be at least 2 years old, toilet-trained and without health conditions or behavioral problems that would be problematic for the Playroom staff.* Advance notice is not necessary for the Child’s Playroom, however, family members need to sign-in at the Playroom upon arrival. Childcare services for court-dependent children may also be arranged by the Worker through customary procedures. If childcare services are not available, the Worker shall advise the family, when notified about the meeting, to make alternate care arrangements for children of relatives or caregivers who are not dependents of the court. The Facilitator shall have available children’s toys and coloring books to keep children entertained in the meeting room in the event that family members with no other recourse bring children to the meeting.

TDM Meeting Process and Structure

Pre-Meeting Dynamics

The Worker and Supervisor shall come prepared to present a summary of the situation and to share ideas and recommendations with TDM participants. *Additionally, it behooves Workers and Supervisors to understand that TDM meetings uphold the principle of decision-making through a team process. New information may be revealed during the meeting that might change the original options discussed by the Worker and Supervisor prior to the meeting. Consequently, Worker and Supervisor need to be receptive to the possibility of modifying their earlier assessments and recommendations.*

It is also important for Workers and Supervisors to be prompt, since the Facilitator intends to start the meeting on time. Staff should remember to allow ample time for parking, if applicable. If the Supervisor is present, but the Worker is late, the meeting may begin. The Facilitator may

wait a reasonable period of time for late parents, explaining the reason for the delay and providing an estimated start time for the meeting. The Worker is responsible for escorting family members and support persons who are late or who leave the meeting early.

The Facilitator prepares the meeting room in advance. Prior to the start of the meeting, the Community Partner introduces himself/herself to the parents and explains his/her function. The Facilitator then escorts family members and their guests into the meeting room, inviting them to select their seats first. Other participants, including F&CS staff, follow.

TDM Meeting Agenda

Two-hour time intervals are set aside for each TDM meeting. A typical meeting lasts from 1.5 to 2 hours. However, at the start of implementation, TDM meetings may run slightly longer as participants acquaint themselves with the process. A TDM meeting is structured sequentially as indicated below:

<u>Stage</u>	<u>Content</u>
Introduction	Welcome/Purpose/Goals/Ground Rules
Identify the Situation	Define the Concerns
Assess of the Situation	Define Strengths/Risks/Safety Needs
Develop Ideas	Brainstorm
Reach a Decision	Develop Consensus/Create Safety or Action Plan/Agency-owned Decision
Recap/Closing	Review Agreement/Check for Understanding

A discussion of each stage follows.

Introduction:

The Facilitator welcomes everyone and describes the purpose and the goals of the meeting. The Facilitator explains the team decision-making process, establishes a safe climate and sets a tone of inclusion. The Facilitator states that all opinions and ideas are considered, and clarifies that if group consensus cannot be achieved, the agency will need to exercise its responsibility to make the final decision. The Facilitator invites participants to introduce themselves and to state their connection to the child and family. After introductions, the Facilitator explains the “Ground Rules,” and asks participants if they wish to enact any additional rules. Once the “Ground Rules” are determined, the Facilitator seeks the agreement of all participants to uphold them throughout the meeting.

Identify the Situation

The Facilitator invites the parents to initiate the discussion by sharing information about their family, situation and/or needs. The Worker and/or Supervisor follow by clearly defining their concerns.

Assess the Situation

It is important that family strengths, safety risks and safety needs are thoroughly examined. For this reason, the assessment stage should not be rushed. All participants are advised to remain receptive to receiving new information that might alter their previous understandings and recommendations. During this stage, the Facilitator elicits specific and behaviorally descriptive information from participants, encouraging “straight talk” and full disclosure of strengths and concerns. The Facilitator summarizes the key points of the assessment, and may choose to list strengths and needs on an easel for easy reference by the group. The Facilitator separates facts from opinions, and identifies differences as well as areas of common ground.

Develop Ideas

During this stage, all participants brainstorm through a free, non-judgmental sharing of ideas. In order to maximize participation, the Facilitator may wish to describe the concept of brainstorming, thus promoting creative thinking and active listening. The Facilitator also assists in clarifying thoughts, summarizing, listing and visualizing ideas.

Reach a Decision

The Facilitator sets an expectation that the team is capable of reaching consensus. The Facilitator encourages the team to consider the merit of each idea, by reality testing possible consequences and the ease or difficulty of implementation. The Facilitator encourages dialogue, checks for agreement, and remains attentive to the feelings and responses of family members. If it appears that reaching consensus is unlikely, the Facilitator reminds the team that the agency may need to make the final decision. Reasons for the decision are discussed. Whether made by consensus or by the agency alone, the decision shall reflect the least intrusive, least restrictive option that provides safety and protection for the child. Criteria for measuring success should be identifiable, and the parties to the safety or action plan should be clear about their respective responsibilities. The decision then becomes the agency’s official position, binding upon all staff.

Recap/Closing

The Facilitator reviews the safety or action plan with the team, checks for understanding, and solicits any further questions. Particularly at this time, the Facilitator acknowledges and addresses participants’ emotions and responses through empathic understanding. The Facilitator may wish to determine at this time if the family is interested in convening a follow-up voluntary Family Conference. If the family expresses interest, the Facilitator shall notify the Family Conference Specialists. The Facilitator ends the meeting by thanking the participants for their contributions.

Ground Rules

The Facilitator shall seek agreement from all participants to adhere to the “Ground Rules.” It is planned that ground rules will be posted at meeting sites for easy reference. Some basic ground rules implemented in TDM meetings are outlined as follows:

Right to privacy (to be distinguished from confidentiality)
Mandated reporting requirements
All participants will be treated with respect
Only one person will speak at a time
Everyone will have an opportunity to speak and to ask questions
No caucusing, passing notes or otherwise communicating in a way that excludes others
Time frame of approximately 2 hours

Participants may wish to enact additional guidelines at their meeting.

Implementation Phases of TDM

PHASE ONE: PLACEMENT PRESERVATION

Description:

Phase One shall focus on preserving existing placements by preventing placement disruptions or by reinstating disrupted placements whenever possible and appropriate. This phase will also include disruptions of non-finalized adoptions, legal guardianships with simultaneous dependencies and children returning from AWOL status.

Phase One Timeline

At Start of Implementation and Thereafter:

TDM meetings for emergency and non-emergency situations relating to the preservation or change of an *existing* placement shall begin at the start of TDM implementation and constitute the only type of TDM to be held for the first 6 months of TDM practice. TDM meetings for children who may require changes in the *levels* of placements under Level 12 shall also begin at the start of TDM implementation. A TDM meeting shall also be mandated if a child might be moved from one level 12 placement to another Level 12 placement. The Worker will not again need to attend a meeting of the Placement and Review Committee (“PARC”) in these cases, since PARC approval for a Level 12 placement will have already been granted.

However, if a Worker is considering a change from a lower-level placement to a Level 12 placement, the Worker needs to have a TDM meeting to make this determination. If the TDM action plan results in a decision to pursue a Level 12 placement, the Worker will then need to proceed to PARC for approval. *As TDM practice progresses, PARC’s approval function for Level 12 placements may be eliminated.* However, PARC will continue to address placements above Level 12, including subacute care and therapeutic homes.

Triggers for Phase One:

- Based upon conversations and contact with caregivers, children and/or other providers, the Worker determines that a placement is becoming unstable and in danger of failure.
- The Worker believes that the issuance of a 7-day notice is imminent.
- The Worker is in receipt of a 7-day notice.
- The Worker has safety concerns about a child's placement.
- The Worker has already removed a child from his/her caregiver due to an emergency response.
- The Worker believes that a child's needs are not being met in his/her current placement.
- The child has stated that he/she wants to change placements for reasons affecting his/her welfare.
- A child returns or is returned to the Child Protective Center after being AWOL.
- The Worker recommends that a child needs a change in the level of care.

Procedure:

At the first sign of a significant problem with a child's placement, the Worker consults with his/her Supervisor to confirm the need for a TDM meeting as a preventative measure. After jointly determining that a TDM meeting is required, the Worker *immediately* notifies the TDM Clerk *by telephone*. The TDM Clerk schedules the TDM meeting within 3 business days of notification for a non-emergency situation or within 2 business days for a crisis situation. Upon receiving the Worker's notification, the TDM Clerk informs the Worker of the date, time and place of the meeting. When a Worker receives a 7-day notice, the Worker shall immediately notify his/her Supervisor and proceed to request a TDM meeting as noted above.

In the course of making the referral, the Worker indicates who should attend the meeting. As noted earlier, the referring Worker invites the parents, legal guardians, caregivers or other care representatives and other providers with whom he/she has regular contact. The Worker prepares the parents and caregivers for participation in the team decision making process and encourages the parents to notify other family members and support persons. The TDM Clerk proceeds to invite the Community Partner, providers, caregiver representatives or DHS staff who will *not* be contacted by the referring worker.

Particularly for long-term placement Workers, it is important to consider inviting parents who retain parental rights to the TDM meeting even if the parents have not been involved with their children for some time. For certain parents, the TDM meeting may rekindle their connection to their child(ren). The Worker shall assess participation of estranged parents on a case-by-case basis, with the best interest of the child serving as the determining factor. In circumstances when the presence of a parent might cause distress to the child or is not permissible by court order, the Worker shall consult with DHS staff in his/her chain of command. It may be possible to arrange for an alternate form of participation with the assistance of TDM staff.

For additional details regarding procedure, please refer to the subsections "Referring Protective Services Worker," "TDM Clerk," and the section "Scheduling and Notification" on pages 8, 13 and 15, respectively.

PHASE TWO: EMERGENCY AND POTENTIAL REMOVALS/ PREVENTING PLACEMENT

Description:

Phase Two shall focus on emergency removals or potential removal situations that result from a hotline referral or that occur at any stage of an open case. This phase includes removals or potential removals from families participating in Family Maintenance, whereas TDM meetings for *removals from caregivers for children already in out-of-home placement* occurs in Phase I. Phase II shall also include removals or removal risks pertaining to finalized adoptions and legal guardianships.

Phase Two Timeline

Undetermined:

The goal of the TDM team is to prevent placement, if possible, by instituting a safety plan approved through the decision-making rule. If placement is necessary, the task of the TDM team is to determine the least restrictive placement appropriate and available at the time that the decision is made. Please refer to the “Goals” section on page 2.

Triggers for Phase Two:

- The Worker determines that it is necessary to remove a child immediately.
- The Worker determines that removal may become necessary if an adequate safety plan is not developed and followed.

Procedure:

The procedure for Phase Two closely parallels that of Phase One. However, the TDM Clerk schedules the TDM meeting for the same or next business day for a removal that has already occurred, or within 2 business days for potential removals, *but always before the detention hearing*. Additional procedures for Phase Two are being developed in consultation with DHS Emergency Response staff and will be formulated in the ensuing months.

PHASE THREE: REUNIFICATIONS AND PERMANENCY PLANNING¹

Description:

Phase Three shall focus on decisions concerning reunifications and permanency planning.

Phase Three Timeline: Undetermined

Triggers for Phase Three:

For Reunifications:

¹*Family Conferencing is often ideally suited for supporting reunifications and permanent plans, particularly for relative and NREFM placements. Workers may wish to invite the family to create a comprehensive family plan in a voluntary Family Conference, thus enhancing the basic TDM decision.*

- When a Worker determines with his/her Supervisor that a child is to begin extended or overnight visits with his/her parents in preparation for reunification.
- When a Worker determines with his/her Supervisor that a child is to be returned home.

For Permanency Planning:

- When, during the course of concurrent planning and before termination of reunification services, a Worker determines with his/her Supervisor that it is unlikely that a child will be reunified with his/her parents or legal guardian and that a permanent plan will be required.

Procedure:

The procedures for Phases One, Two and Three are nearly identical. However, for reunification and permanency planning TDM meetings, the TDM Clerk schedules the meeting preferably within 5 business days of notification, but always *before the next court hearing*. (On a case-by-case basis, the family may want more than 5 business days' notice in order to maximize the participation of relatives and support persons. If so, the Worker should inform the TDM Clerk that the family prefers a later date. Additional procedures for Phase Three will be developed with staff assistance, particularly from the units who routinely handle reunification and permanency planning issues.

Choosing the Right Meeting – TDMs, MDTs, Administrative Reviews, Family Conferences and PARC

MDTs and Administrative Reviews

TDM meetings will be limited to issues involving *placement-related decisions* corresponding to removals/potential removals, placement preservation, permanency planning and reunification. TDM meetings will handle the *placement decisions* that were formerly addressed in MDTs and/or Administrative Reviews. The TDM meeting should involve the key participants that would normally have been invited to the MDT or Administrative Review, with the addition of parents, relatives, support people and the child, if appropriate. However, MDTs and Administrative Reviews will continue to be utilized for issues that do *not* focus on placement decisions.

Family Conferences

As with MDTs and Administrative Reviews, prior to the adoption of TDM, Family Conferences used to address placement decisions as well as other matters. With the implementation of TDM meetings, Family Conferences shall *complement* TDM practice by offering families, on a *voluntary* basis, the opportunity to *create their own plans*, approved by Workers, regarding a broad range of concerns. Issues include making comprehensive service plans, arranging visitation, assisting caregivers, supporting teens, and enlisting family support of reunification or permanent plans, particularly those relating to relative or NREFM care.

PARC

Placement changes for children already approved for a Level 12 placement who are moving from one Level 12 placement to another Level 12 placement shall be handled by a TDM meeting. However, if a Worker is considering a change from a lower-level placement to a Level 12 placement, the Worker needs to have a TDM meeting in order to make this determination. If the TDM action plan results in a decision to pursue a Level 12 placement, the Worker will then need to proceed to PARC.

PARC shall continue to approve placements for Levels 12 and higher, including subacute placements and therapeutic homes, in conjunction with its customary counterparts in other agencies. It is anticipated that as TDM progresses, it will be able to substitute for PARC with respect to Level 12 placements. PARC shall also continue to be utilized for Workers seeking non-relative adoptive homes as a concurrent or permanent plan, until TDM assumes this function. It is planned that TDM will handle this duty starting in month 12 of TDM implementation.

With the advent of TDM practice, Workers will no longer need to present at PARC to convert the status of county-licensed foster homes from shelter placements to long-term placements. However, Workers will need to complete PARC paperwork pertaining to these conversions. (Please refer to Information Memo: 03-2 dated February 18, 2003 for more detail.) If a county-licensed foster home refuses to agree to the conversion, a TDM meeting shall be necessary.

Documentation for TDM Meetings

By the end of the TDM meeting, the Facilitator prepares the “TDM Meeting Record” detailing the safety or action plan and the names of the TDM participants. The Facilitator copies and distributes this Summary to all attendees prior to their departure from the meeting. Parents who did not attend the TDM meeting are also entitled to receive copies of the “TDM Meeting Record.” In rare cases when an Appeal is held, the appeal request shall be documented by the “TDM Appeal” form prepared by the Facilitator. In such instances, the “TDM Meeting Record” will note the Appeal decision and notice of the Appeal decision will be mailed to the TDM participants.

The TDM Clerk shall enter into the TDM database basic information from the “TDM Request” form and the “TDM Meeting Record.” Hard copies of these forms shall also be filed by the TDM Clerk and retained in the Placement Unit.

In conjunction with placement data from other sources in Family & Children’s Services, the Self-Evaluation Team and/or other DHS staff shall periodically analyze data from the TDM database to measure placement outcomes that correspond to long-term strategic goals of the Department and to refine TDM practice accordingly.

TDM Meeting Supplies

The following supplies are needed to perform the work required by TDM practice:

- Speakerphones
- Fax
- Copier
- Computers/laptops for use by Facilitators at community-based locations
- Tables & chairs
- Nametags
- Large calendar for posting by Placement Unit Staff
- Tissues
- Pens
- Paper
- Easels & markers
- Ground rules (laminated, posted)
- DHS information brochures
- Reference books/Pamphlets for community-based services
- Coloring books/Children's toys
- Children's tables and chairs

Protocol Exceptions

Any exceptions to this protocol shall be made at the Program Manager or Deputy Director level on a case-by-case basis by referral through a Section Manager.